

BEFORE THE MINNESOTA
EMERGENCY MEDICAL SERVICES REGULATORY BOARD

In the Matter of
Christopher Hodge, EMT-B
Certificate Number: 942106

**FINDINGS OF FACT,
CONCLUSIONS,
AND FINAL ORDER**

On January 12, 2009, the Complaint Review Panel ("Panel") of the Minnesota Emergency Medical Services Regulatory Board ("Board") initiated the above-entitled proceeding against Christopher Hodge, EMT-B ("Respondent"), by service of a Notice of Petition and Petition to Suspend Certification.

The matter came on for consideration by the Board pursuant to Minnesota Statutes section 144E.28, subdivision 5(b) (2008), at a regularly scheduled meeting on March 19, 2009, convened in Conference Room A (fourth floor), University Park Plaza, 2829 University Avenue S.E., Minneapolis, Minnesota 55414.

The following Board members were present: James Rieber, Chair; Lisa Consie; Kathleen Haney; Laurie Hill; Robert Jensen; Paul Satterlee, M.D.; Marlys Tanner; and Mari Thomas, M.D. Karen B. Andrews, Assistant Attorney General, appeared and presented oral argument on behalf of the Panel. Respondent made no appearance. Nathan W. Hart, Assistant Attorney General, was present as legal advisor to the Board. As members of the Panel, Dawn Bidwell, Brenda Brown, Paula Fink Kochen, Paul Stelter, and Kevin Miller did not participate in deliberations or vote in the matter.

Based on the record and the proceedings herein, the Board makes the following:

FINDINGS OF FACT

1. In March 2008, the Panel referred Respondent to the Health Professionals Services Program (“HPSP”) after he was convicted of possession of a controlled substance while driving and sought residential chemical dependency treatment. The Panel agreed to issue Respondent an EMT-B certificate based on his agreement to enroll in HPSP and comply with the terms and conditions of his HPSP Participation Agreement.

2. In April 2008, Respondent contacted HPSP and completed an intake interview. Respondent disclosed a history of depression and anxiety, with manic symptoms, and a substance disorder diagnosis. Respondent stated his drug of choice is marijuana and reported a sobriety date of March 21, 2007. Additionally, Respondent disclosed ongoing problems with knee pain and stated he had been taking prescribed Darvocet and Vicodin for approximately eight months.

3. HPSP determined Respondent was eligible to participate in the program, and on May 19, 2008, HPSP received Respondent’s signed Participation Agreement. Respondent began monitoring in accordance with the terms of his Monitoring Plan, which was based on Respondent’s substance disorder and psychiatric disorder.

4. On July 1, 2008, HPSP requested that Respondent obtain a pain management evaluation to address his increasing use of narcotics, including Vicodin and Roxicet, in light of Respondent’s chemical dependency. Respondent failed to comply with HPSP’s request.

5. On June 21, 2008, July 8, 2008, and July 12, 2008, Respondent failed to submit urine specimens for toxicology screening as requested by HPSP.

6. On July 23, 2008, Respondent was discharged from HPSP for noncompliance, and his case was referred to the Board.

7. At the conference with the Review Panel on October 20, 2008, Respondent stated he failed to comply with HPSP because he was angry over their recommended three-year contract. Respondent stated he attended Alcoholics Anonymous (“AA”) once or twice per month and occasionally saw a psychologist and psychiatrist. He stated he takes medication for anxiety and depression and was still using narcotics for knee pain as of the date of the conference. Respondent stated he would be having knee surgery soon and was actively seeking employment in the emergency medical services field.

Based upon the foregoing Findings of Fact, the Board makes the following:

CONCLUSIONS

1. The Board has jurisdiction in this matter pursuant to Minnesota Statutes sections 144E.28 and 144E.30 (2008).

2. Respondent was given timely and proper notice of the March 19, 2009 hearing before the Board and of his right under Minnesota Statutes section 144E.28, subdivision 5(b), to request a contested case hearing to be conducted in accordance with Minnesota Statutes chapter 14.

3. The Panel has complied with all relevant substantive and procedural requirements of statute and rule.

4. The Panel has proven by a preponderance of the evidence that Respondent has violated Minnesota Statutes section 144E.28, subdivision 5(a)(4), because he “is actually or potentially unable to provide emergency medical services with reasonable skill and safety to patients by reason of illness, use of alcohol, drugs, chemicals, or any other material, or as a result of any mental or physical condition.”

5. As a result of the violation set forth above and Respondent's failure to request a contested case hearing within 30 days of receipt of notice of his right to do so or at any time, the Board has the authority without further proceedings to take disciplinary action against Respondent's EMT-B certification. Minn. Stat. §§ 144E.28, subds. 4 and 5, 144E.30 (2008).

Based on the foregoing Findings of Fact and Conclusions, the Board issues the following:

ORDER

1. Respondent's EMT-B certificate is **SUSPENDED**, effective immediately. At no time subsequent to the date of this Order shall Respondent engage in any act in Minnesota which constitutes practice as an EMT-B as defined in Minnesota Statutes sections 144E.001 and 144E.28, nor shall he in any manner represent or hold himself out as being authorized to so practice.

2. Not later than 10 days from the date of this Order, Respondent shall surrender and cause the Board to receive his current EMT-B certificate card.

3. Respondent may apply to the Board for reinstatement of his certification as an EMT-B not earlier than 12 months from the date of this Order. Any such application shall be accompanied by evidence of 12 months of uninterrupted sobriety and evidence of compliance with all applicable continuing education or training requirements under Minnesota Statutes section 144E.28, subdivisions 7 and 8 (2008).

4. Respondent shall appear before the Panel to review any application for reinstatement submitted pursuant to paragraph 3. The burden of proof shall be on Respondent to demonstrate that he is able to provide emergency medical services in a fit and competent manner without risk of harm to the public. The Board reserves the right to approve an application for


reinstatement only upon the imposition of conditions and limitations which the Board deems necessary to ensure public protection.

5. This Order is a public document.

The foregoing Findings of Fact, Conclusions, and Order constitute the Decision of the Board in this matter.

Dated: 4-2, 2009

MINNESOTA EMERGENCY MEDICAL
SERVICES REGULATORY BOARD

By: 
JAMES RIEBER, CHAIR

AG: #2368594-v1